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Trip Number

Services Agency

Travel Expense Statement

Trip Number

8550106151

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/04/2018 07:30 AM Trip End Date: 27/04/2018 10:00 AM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 3. Internal governance

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 8 Adelaide Street W, Toronto, ON

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 16.00 Reimbursement Amount 16.00

Cost Assignment

16.00 CAD of 16.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date: 14/08/2020

Trip Number

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8550106151

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/04/2018 07:30 AM
Trip End Date: 27/04/2018 10:00 AM

Date	No.	Expense Type	Amount (CAD)	Tax Jur Code
27/04/2018	001	Parking/ Tolls	16.00	CAON
		Sum of Receipts	16.00	CAON

Addi	tional Receipt Information	on	
No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking receipt
		Additional Text for Receipt	Parking, meeting downtown Toronto, Deloitte

Comments

Meeting with Deloitte

1 / 2

8550106152

Trip Number

Travel Expense Statement

8550106152 Trip Number

Personnel Number:

Traveller's Name:

David GLOS

Trip Start Date:

27/04/2018

11:00 AM

Trip End Date:

27/04/2018

15:00 PM

General Trip Information

Country/Region:

CA-Ontario

STA Applied:

Yes

Category:

3. Internal governance

TAN:

000

Trip Type Statutory: Destination:

1- Regular Travel 3389 Steeles Avenue East, Toronto, ON CDF:

Departure Address

1980 Matheson Blvd E, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective:

Greater Toronto Area Region

Summary of Settlement	
Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	9.00
Reimbursement Amount	9.00

Cost Assignment

9.00 CAD of 9.00 CAD assigned to:

Company Code:

0850

CBSA / ASFC

Cost Center:

397188800

Director EIOD

Order:

Fund:

Functional Area:

20100

Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date: 14/08/2020

Page:

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Trip Number 8550106152

Travel Expense Statement

Personnel Number:

Traveller's Name:

David GLOS

Trip Start Date:

27/04/2018

11:00 AM

Trip End Date:

27/04/2018

15:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/04/2018	001	Parking/ Tolls	9.00	CAON
		Sum of Receipts	9.00	CAON

Addi	Additional Receipt Information					
No.	Receipt	Type	Content			
001	Parking/ Tolls	Description	Parking receipt			
		Additional Text for Receipt	Parking receipt			

Comments

JMT meeting, CFSEU

1 / 2

8550106456

Travel Expense Statement

Trip Number

Personnel Number:

8550106456

Trip Number

Traveller's Name: David GLOS

Trip Start Date: 15/05/2018 11:00 AM Trip End Date: 15/05/2018 16:00 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 3. Internal governance

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 3389 Steeles Avenue East, Toronto, ON

Departure Address 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 9.00 Reimbursement Amount 9.00

Cost Assignment

9.00 CAD of 9.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Trip Number

8550106456

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 15/05/2018 11:00 AM Trip End Date: 15/05/2018 16:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
15/05/2018	001	Parking/ Tolls	9.00	CAON
		Sum of Receipts	9.00	CAON

Addi	Additional Receipt Information					
No.	Receipt	Туре	Content			
001	Parking/ Tolls	Description	Parking receipt			
		Additional Text for Receipt	Parking at RCMP			

Comments

Meeting with CFSEU and INSET at RCMP

14/08/2020 Date:

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Travel Expense Statement

Trip Number

8550107902

Personnel Number:

8550107902

Trip Number

Traveller's Name: David GLOS

Trip Start Date: 27/06/2018 08:00 AM Trip End Date: 27/06/2018 13:00 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

Category: 3. Internal governance TAN:

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 3389 Steeles Avenue East, Toronto, ON

Departure Address 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 9.00 Reimbursement Amount 9.00

Cost Assignment

9.00 CAD of 9.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date: 14/08/2020

Trip Number

Page: 2 / 2

8550107902

Travel Expense Statement

Personnel Number:

Traveller's Name:

David GLOS

Trip Start Date:

27/06/2018

08:00 AM

Trip End Date:

27/06/2018

13:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/06/2018	001	Parking/ Tolls	9.00	CAON
		Sum of Receipts	9.00	CAON

Additional Receipt Information			
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking receipt
		Additional Text for Receipt	Parking @ RCMP office

Comments

Meeting w/RCMP

Canada

14/08/2020 Date:

Trip Number

1 / 2 Page:

8550108758

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 10/08/2018 09:30 AM Trip End Date: 10/08/2018 15:30 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 3. Internal governance

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Bay and College - TPS HQ

Departure Address 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 24.70 Reimbursement Amount 24.70

Cost Assignment

24.70 CAD of 24.70 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date:

14/08/2020

Page:

Trip Number

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Travel Expense Statement

Personnel Number:

Traveller's Name:

David GLOS

Trip Start Date:

10/08/2018

09:30 AM

Trip End Date:

10/08/2018

15:30 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
0/08/2018	001	Public Transit	24.70 CAON	CAON
		Sum of Receipts	24.70	CAON

Addi	tional Receipt Information	on	
No.	Receipt	Туре	Content
001	Public Transit	Description	UP Express train tickets
		Additional Text for Receipt	Return travel, YYZ to Union Station. \$12.25 each way

Comments

Meeting with EIOD-NHQ and Toronto Police Services re: partnership

14/08/2020

Trip Number

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Trip Number

8550109004

Date:

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 17/08/2018 11:30 AM Trip End Date: 17/08/2018 16:00 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 3. Internal governance

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 1 Front Street West

Departure Address (home)

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 20.30 Reimbursement Amount 20.30

Cost Assignment

20.30 CAD of 20.30 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date:

14/08/2020

Page:

Trip Number

2/2

Travel Expense Statement

8550109004

Personnel Number:

Traveller's Name:

David GLOS

Trip Start Date:

17/08/2018

11:30 AM

Trip End Date:

17/08/2018

16:00 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
17/08/2018	001	Public Transit	20.30 CAON	CAON
		Sum of Receipts	20.30	CAON

Addi	tional Receipt Information		
No.	Receipt	Туре	Content
001	Public Transit	Description	GO Train
		Additional Text for Receipt	GO Train receipt, home to 1 Front St W. Day pass = same price as two one-way trips.

Comments

Meeting with NHQ & NGOs re: Detentions

Trip Number

Travel Expense Statement

Trip Number

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 07/09/2018 08:00 AM
Trip End Date: 07/09/2018 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St, Hamilton, ON

Departure Address (home)

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement				
Expenses	Amount (CAD)			
Sum of Receipts to be Reimbursed	10.00			
Reimbursement Amount	10.00			

Cost Assignment

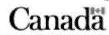
10.00 CAD of 10.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 Director EIOD

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00



14/08/2020 Date:

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Trip Number

8550109733

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 07/09/2018 08:00 AM Trip End Date: 16:00 PM 07/09/2018

Date	No.	Expense Type	Amount (CAD)	Tax Jur Code
)7/09/2018	001	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON

Addi	tional Receipt Informatio	on	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking receipt
		Additional Text for Receipt	Parking at Hamilton EIOD office

Comments

Meeting with employees at EIOD-Hamilton/Kitchener

Trip Number

1 / 2

Travel Expense Statement

8550111582

Trip Number

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 06/11/2018 14:00 PM Trip End Date: 06/11/2018 17:30 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 3. Internal governance

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 789 Yonge Street, Toronto, ON Departure Address 6900 Airport Rd, Mississauaga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement				
Expenses	Amount (CAD)			
Sum of Receipts to be Reimbursed	25.00			
Reimbursement Amount	25.00			

Cost Assignment

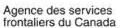
25.00 CAD of 25.00 CAD assigned to:

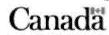
Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00





Date: 14/08/2020

Trip Number

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8550111582

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 06/11/2018 14:00 PM
Trip End Date: 06/11/2018 17:30 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/11/2018	001	Parking/ Tolls	25.00	CAON
		Sum of Receipts	25.00	CAON

Addi	tional Receipt Informatio	n	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking receipt

Comments

Representing CBSA at the Ontario Federal Council's Networking Event. Participated as executive mentor.

Date:

Page:

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14/08/2020

Travel Expense Statement

Trip Number

8550111583

Personnel Number:

Traveller's Name:

8550111583

David GLOS

Trip Start Date:

07/11/2018

08:15 AM

Trip End Date:

07/11/2018

13:30 PM

General Trip Information

Country/Region:

CA-Ontario

STA Applied:

Yes

Category:

3. Internal governance

TAN: CDF:

000

Destination:

40 College St, Toronto, ON

1- Regular Travel

Departure Address

Trip Type Statutory:

(home)

RATOC Number:

Travel Plan Reference Number:

Objective:

Greater Toronto Area Region

Summary of Settlement				
Expenses	Amount (CAD)			
Sum of Receipts to be Reimbursed	20.00			
Reimbursement Amount	20.00			

Cost Assignment

20.00 CAD of 20.00 CAD assigned to:

Company Code:

0850

CBSA / ASFC

Cost Center:

397188800

Director EIOD

Order:

Fund:

Functional Area:

20100

Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Trip Number

8550111583

8550111583

Travel Expense Statement

Personnel Number:

David GLOS Traveller's Name:

Trip Start Date: 07/11/2018 08:15 AM Trip End Date: 07/11/2018 13:30 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur Code
07/11/2018	001	Parking/ Tolls	20.00	CAON
		Sum of Receipts	20.00	CAON

Addi	tional Receipt Informatio	n	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking receipt

Comments

CBSA representative at media event, Toronto Police Services HQ

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 16/05/2019 07:30 AM Trip End Date: 16/05/2019 15:30 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St, Hamilton, ON

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 11.00 Reimbursement Amount 11.00

Cost Assignment

11.00 CAD of 11.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC

Cost Center: 397188800 Dir. Int. & Enf. GTA

Order: Fund:

Functional Area: 20100 Immigration Investi.

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date: 14/08/2020

Trip Number

Page: 2 / 2

8550119497

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 16/05/2019 07:30 AM
Trip End Date: 16/05/2019 15:30 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
16/05/2019	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Additional Receipt Information				
No.	Receipt	Туре	Content	
001	Parking/ Tolls	Description	Parking receipt	
		Additional Text for Receipt	Parking at 55 Bay St, Hamilton	

Comments

RSMT & Employee Town Hall

Trip Number

Travel Expense Statement

Trip Number

8550063344

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/03/2013 07:00 AM Trip End Date: 26/03/2013 19:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

6. Prior to April 1, 2014/ SAP TAN: Category:

Trip Type Statutory: CDF: 000

Destination: Mississauga

Departure Address **RATOC Number:**

Travel Plan Reference Number:

Objective: Meeting with CAPIC

Summary of Settlement				
Expenses	Amount (CAD)			
Travel Flat Rates	55.55			
Reimbursement Amount	55.55			

Cost Assignment

55.55 CAD of 55.55 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 **Director EIOD**

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 81501 TRAVEL & OTHER ADM CLOSED

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Kilometer Allowance					
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)	
26/03/2013	101	0.55	Employer Request, Ontario	55.55	
				55.55	

Canada

Date: 18/08/2020

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Trip Number 8550063344

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/03/2013 07:00 AM
Trip End Date: 26/03/2013 19:00 PM

Agence des services frontaliers du Canada

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers		OT Mileage
March 26, 2013	Kilometers:	101

Travel Expense Statement

Trip Number

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 08/03/2013 07:00 AM
Trip End Date: 08/03/2013 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: Mississauga

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Meeting with YWCA

Summary of SettlementExpensesAmount (CAD)Travel Flat Rates52.80Reimbursement Amount52.80

Cost Assignment

52.80 CAD of 52.80 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397188800 Director EIOD

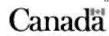
Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 81501 TRAVEL & OTHER ADM CLOSED

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Kilometer Allowance					
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)	
08/03/2013	96	0.55	Employer Request, Ontario	52.80	
				52.80	



Date: 18/08/2020

Page: 2 / 2

Trip Number

8550063345

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 08/03/2013 07:00 AM
Trip End Date: 08/03/2013 19:00 PM

Agence des services frontaliers du Canada

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers			OT Mileage
March 8, 2013	Kilometers:	96	

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Trip Number

Travel Expense Statement

Trip Number

8550068183

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 14/01/2014 07:00 AM Trip End Date: 14/01/2014 19:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

6. Prior to April 1, 2014/ SAP TAN: Category:

Trip Type Statutory: CDF: 000

Destination: **TORONTO**

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: MEETING WITH RDG

Summary of Settlement	
Expenses	Amount (CAD)
Per Diems for Meals	15.10
Travel Flat Rates	70.40
Sum of Receipts to be Reimbursed	10.00
Reimbursement Amount	95.50

Cost Assignment

95.50 CAD of 95.50 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: Operating-Non-Salary 2001

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
14/01/2014	001	Lunch	15.10	CAON
		Sum Meals & Incid. man. keyed	15.10	
		Total Meals and Incidentals	15.10	

Kilometer Allowance

Date:

18/08/2020

Page:

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Travel Expense Statement

Trip Number

8550068183

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 14/01/2014 07:00 AM Trip End Date: 14/01/2014 19:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
14/01/2014	128	0.55	Employer Request, Ontario	70.40
				70.40

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers		OT Mileage
January 14, 2014	Kilometers:	128

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
14/01/2014	002	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON

Trip Number

Travel Expense Statement

Trip Number

8550068231

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 20/08/2013 07:00 AM Trip End Date: 20/08/2013 19:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

6. Prior to April 1, 2014/ SAP TAN: Category:

Trip Type Statutory: CDF: 000

Destination: **HAMILTON**

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: MEETING AT HAMILTON AIRPORT

Summary of Settlement	
Expenses	Amount (CAD)
Per Diems for Meals	15.15
Travel Flat Rates	126.50
Sum of Receipts to be Reimbursed	14.00
Reimbursement Amount	155.65

Cost Assignment

155.65 CAD of 155.65 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: Operating-Non-Salary 2001

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/08/2013	001	Lunch	15.15	CAON
		Sum Meals & Incid. man. keyed	15.15	
		Total Meals and Incidentals	15.15	

Kilometer Allowance

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 20/08/2013 07:00 AM
Trip End Date: 20/08/2013 19:00 PM

Date	km Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
20/08/2013	230 0.55	Employer Request, Ontario	126.50
			126.50

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers		0	T Mileage
August 20, 2013	Kilometers:	230	

Receipts			.	T 1
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/08/2013	002	Parking/ Tolls	14.00	CAON
		Sum of Receipts	14.00	CAON

Trip Number

Canada

Date: 18/08/2020

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Travel Expense Statement

Trip Number

8550082980

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 01/12/2015 07:00 AM
Trip End Date: 01/12/2015 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 5. Other Travel TAN:

Trip Type Statutory: CDF: 000

Destination: Mississauga

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: to correct an error

Summary of Settlement	
Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	24.00
Reimbursement Amount	24.00

Cost Assignment

24.00 CAD of 24.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 35220 AIR MODE COMMERCIAL

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Agence des services frontaliers du Canada



Date: 18/08/2020

Trip Number

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8550082980

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 01/12/2015 07:00 AM
Trip End Date: 01/12/2015 19:00 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
01/12/2015	001	Other Travel Expenses	24.00	CAON
		Sum of Receipts	24.00	CAON

Addit	tional Receipt Information			
No.	Receipt	Туре	Content	
001	Other Travel Expenses	Description	To correct error	

Date: 17/08/2020

Trip Number

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8550079977

Travel Expense Statement

Personnel Number:

8550079977

Trip Number

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 04/06/2015 00:00 AM
Trip End Date: 04/06/2015 00:01 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. Hamilton, ON

Departure Address RATOC Number:

Travel Plan Reference Number:
Objective: Operations

Summary of SettlementExpensesAmount (CAD)Per Diems for Meals16.60Travel Flat Rates69.56Sum of Receipts to be Reimbursed36.31Reimbursement Amount122.47

Cost Assignment

122.47 CAD of 122.47 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: 2001 Operating-Non-Salary
Functional Area: 35220 AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	004	Lunch	16.60	CAON
		Sum Meals & Incid. man. keyed	16.60	
		Total Meals and Incidentals	16.60	

Kilometer Allowance

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 04/06/2015 00:00 AM Trip End Date: 04/06/2015 00:01 AM

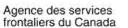
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/06/2015	65	0.54	Employer Request, Ontario	34.78
04/06/2015	65	0.54	Employer Request, Ontario	34.78
				69.56

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	'S		OT Mileage
June 4, 2015		Kilometers:	65
Start Location:	2720 Britannia Rd Mississauga, ON	End Location:	55 Bay Street Hamilton, ON
June 4, 2015		Kilometers:	65
Start Location:	55 Bay Street Hamilton, ON	End Location:	2720 Britannia Rd Mississauga, ON

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	001	Parking/ Tolls	5.00	CAON
04/06/2015	002	Parking/ Tolls	10.00	CAON
04/06/2015	003	Parking/ Tolls	21.31	CAON
		Sum of Receipts	36.31	CAON

Addi	tional Receipt Informatio	on	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking at 55 Bay St Hamilton, ON
		Additional Text for Receipt	Parking at 55 Bay St Hamilton, ON
002	Parking/ Tolls	Description	Parking at 55 Bay St Hamilton, ON
		Additional Text for Receipt	Parking at 55 Bay St Hamilton, ON
003	Parking/ Tolls	Description	407 ETR Tolls QEW to Hwy 403
		Additional Text for Receipt	For management meeting at 55 Bay St. Hamilton, ON
004	Lunch	Description	lunch
		Additional Text for Receipt	lunch



Canada

Date: 17/08/2020

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Trip Number

8550079977

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 04/06/2015 00:00 AM
Trip End Date: 04/06/2015 00:01 AM

Comments

Road Show-Management Meeting at 55 Bay St. Hamilton

Travel Expense Statement

Trip Number

8550085602

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 11/01/2016 00:00 AM
Trip End Date: 05/02/2016 00:00 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: various

Departure Address RATOC Number:

Travel Plan Reference Number:
Objective: Programs

Summary of Settlement Expenses Amount (CAD) Sum of Receipts to be Reimbursed 63.00 Reimbursement Amount 63.00

Cost Assignment

63.00 CAD of 63.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 35220 AIR MODE COMMERCIAL

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date: 17/08/2020

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Trip Number

8550085602

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 11/01/2016 00:00 AM
Trip End Date: 05/02/2016 00:00 AM

Receipts					
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code	
14/01/2016	001	Parking/ Tolls	18.00	CAON	
03/02/2016	002	Parking/ Tolls	21.00	CAON	
13/01/2016	003	Parking/ Tolls	24.00	CAON	
		Sum of Receipts	63.00	CAON	

Trip Number

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Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/10/2016 08:00 AM Trip End Date: 26/10/2016 13:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities Category: TAN:

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: Pearson International Airport, Mississauga, ON

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 27.00 Reimbursement Amount 27.00

Cost Assignment

27.00 CAD of 27.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 35220 AIR MODE COMMERCIAL

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Agence des services frontaliers du Canada



Date: 17/08/2020

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Trip Number

8550092549

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/10/2016 08:00 AM
Trip End Date: 26/10/2016 13:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
26/10/2016	001	Parking/ Tolls	27.00	CAON
		Sum of Receipts	27.00	CAON

Addi	tional Receipt Information	ı		
No.	Receipt	Туре	Content	
001	Parking/ Tolls	Description	Parking ticket for	meeting at PIA

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Travel Expense Statement

Trip Number

8550092550

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 06/10/2016 07:00 AM Trip End Date: 06/10/2016 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 1 Front Street, Toronto, Ontario

Departure Address **RATOC Number:**

Travel Plan Reference Number: Objective: Operations

Summary of Settlement	
Expenses	Amount (CAD)
Per Diems for Meals	17.25
Sum of Receipts to be Reimbursed	21.80
Reimbursement Amount	39.05

Cost Assignment

39.05 CAD of 39.05 CAD assigned to:

CBSA / ASFC Company Code: 0850 Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 35220 AIR MODE COMMERCIAL

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/10/2016	002	Lunch	17.25	CAON
		Sum Meals & Incid. man. keyed	17.25	
		Total Meals and Incidentals	17.25 17.25	

Trip Number

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8550092550

Travel Expense Statement

Personnel Number:

8550092550

Traveller's Name: Doreen E MAYBEE

 Trip Start Date:
 06/10/2016
 07:00 AM

 Trip End Date:
 06/10/2016
 16:00 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/10/2016	001	Parking/ Tolls	21.80	CAON
		Sum of Receipts	21.80	CAON

Addi	tional Receipt Information	on	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	GO Bus receipt
		Additional Text for Receipt	Travel to 1 Front Street

Comments

RSMT Meeting & Roadshow

Trip Number

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8550096043

Trip Number

Canada Border Services Agency

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 03/03/2017 00:00 AM Trip End Date: 03/03/2017 00:01 AM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

Category: 1. Operational Activities TAN:

CDF: 000 Trip Type Statutory: 1- Regular Travel

Destination: 250 Yonge Street, 35th floor, Toronto, ON

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Expenses Amount (CAD) Per Diems for Meals 18.05 Travel Flat Rates 24.53 Sum of Receipts to be Reimbursed 20.80 Reimbursement Amount 63.38

Cost Assignment

63.38 CAD of 63.38 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund: 2001 Operating-Non-Salary Functional Area: 35220 AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
03/03/2017	003	Lunch	18.05	CAON
		Sum Meals & Incid. man. keyed	18.05	
		Total Meals and Incidentals	18.05	

Kilometer Allowance

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 03/03/2017 00:00 AM Trip End Date: 03/03/2017 00:01 AM

Date	km Flat Rate	* Vehicle Type, Vehicle Class	Amount (CAD)
03/03/2017		Employer Request, Ontario	
03/03/2017		Employer Request, Ontario	
03/03/2017		Employer Request, Ontario	
			24.53

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	s		OT Mileage
March 3, 2017		Kilometers:	
Start Location:		End Location:	Bradford Go Station
March 3, 2017		Kilometers:	13
Start Location:	Newmarket Go Bus Station	End Location:	Bradford Go Station
March 3, 2017		Kilometers:	
Start Location:	Bradford Go Station	End Location:	

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
03/03/2017	001	Public Transit	10.90	CAON
03/03/2017	002	Public Transit	9.90	CAON
		Sum of Receipts	20.80	CAON

Additional Receipt Information				
No.	Receipt	Туре	Content	
001	Public Transit	Description	Go Transit	
		Additional Text for Receipt	Bradford Go to Union Go Station	
002	Public Transit	Description	Union Go to Newmarket Go Bus Terminal	
003	Lunch	Description	Lunch	

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Trip Number 8550096043

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 03/03/2017 00:00 AM
Trip End Date: 03/03/2017 00:01 AM

Comments

Freight Advisory Committee Meeting on March 3 - Greater Golden Horseshoe Multimodal Transportation Plan

Trip Number

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8550097772

Travel Expense Statement

Personnel Number:

8550097772

Trip Number

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 18/04/2017 06:00 AM
Trip End Date: 18/04/2017 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 370 King Street West

Departure Address RATOC Number:

Travel Plan Reference Number:
Objective: Operations

Summary of SettlementExpensesAmount (CAD)Per Diems for Meals18.05Travel Flat Rates17.76Sum of Receipts to be Reimbursed21.80Reimbursement Amount57.61

Cost Assignment

57.61 CAD of 57.61 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397150000 Dir. Comm. Ops

Order:

Fund:

Functional Area: 35220 AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/04/2017	002	Lunch	18.05	CAON
		Sum Meals & Incid. man. keyed	18.05	
		Total Meals and Incidentals	18.05	

Kilometer Allowance

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Trip Number

8550097772

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 18/04/2017 06:00 AM
Trip End Date: 18/04/2017 16:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
18/04/2017			Employer Request, Ontario	
18/04/2017			Employer Request, Ontario	
				17.76

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	S		OT Mileage
April 18, 2017		Kilometers:	
Start Location:		End Location:	Bradford GO Station
April 18, 2017		Kilometers:	
Start Location:	Bradford GO Station	End Location:	

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/04/2017	001	Public Transit	21.80	CAON
		Sum of Receipts	21.80	CAON

Additional Receipt Information					
No.	Receipt	Туре	Content		
001	Public Transit	Description	GO Train-all day pass		
		Additional Text for Receipt	Bradford to Union Station		
002	Lunch	Description	Lunch		
		Additional Text for Receipt	Lunch		

Comments

PSLREB - Hearing

Travel Expense Statement

Trip Number

8550071631

Personnel Number:

Trip Number

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 27/06/2014 05:00 AM Trip End Date: 27/06/2014 17:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: CDF: 000

Destination: **OTTAWA**

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: MEETING WITH CIC AND PROVINCE OF ONTARIO

Summary of Settlement			
Expenses	Amount (CAD)		
Per Diems for Meals	15.25		
Travel Flat Rates	54.72		
Sum of Receipts to be Reimbursed	68.00		
Sum of Receipts Paid by Company	533.02		
Total Cost of Trip	670.99		
Less: Sum of Receipts Paid by Company	(533.02)		
Reimbursement Amount	137.97		

Cost Assignment

670.99 CAD of 670.99 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

MANAGEMENT OVER CLOSED Functional Area: 80110

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/06/2014	003	Lunch	15.25	CAON
		Sum Meals & Incid. man. keyed	15.25	

Date:

18/08/2020 2 / 2 Page:

8550071631

Trip Number

Personnel Number:

Goran VRAGOVIC Traveller's Name:

Travel Expense Statement

Trip Start Date: 27/06/2014 05:00 AM Trip End Date: 27/06/2014 17:00 PM

> Total Meals and Incidentals 15.25

Kilometer Allowance						
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)		
27/06/2014	96	0.57	Employer Request, Ontario	54.72		
				54.72		

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers	OT Mileage	
June 27, 2014	Kilometers: 96	

Receipts					
Date	Date No. Expense Type		Amount (CAD)	Tax Jur. Code	
27/06/2014	004	Parking/ Tolls	28.00	CAON	
27/06/2014	005	Taxi	40.00	CAON	
		Sum of Receipts	68.00	CAON	
27/06/2014	001	Airfare paid by CBSA	517.37	CAON	
27/06/2014	002	X – Do not use	15.65	CAON	
		Total Paid by Company	533.02	CAON	

Addi	tional Receipt Information		
No.	Receipt	Туре	Content
001	Airfare paid by CBSA	Description	TORONTO/OTTAWA RETURN
		Provider Category	Airline
		Provider Code	Air Canada
005	Taxi	Description	CAPITAL TAXI
		Location	OTTAWA

17/08/2020 Date:

Trip Number

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8550074659

Travel Expense Statement

Personnel Number:

8550074659

Trip Number

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM Trip End Date: 19/11/2014 16:00 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 1. Operational Activities

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: Within GTA Region

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** 352.53 **Travel Flat Rates** Sum of Receipts to be Reimbursed 28.25 Reimbursement Amount 380.78

Cost Assignment

380.78 CAD of 380.78 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 80110 MANAGEMENT OVER CLOSED

Date	No.	Expense Type	Amount Tax Ju (CAD) Code	
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilometer	Allowance		
Date	km Flat Rate	* Vehicle Type, Vehicle Class	Amount (CAD)
02/10/2014	51 0.58	Employer Request, Ontario	29.33

Travel Expense Statement

Trip Number

8550074659

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM Trip End Date: 19/11/2014 16:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
02/10/2014	10	0.58	Employer Request, Ontario	5.75
02/10/2014	8	0.58	Employer Request, Ontario	4.60
02/10/2014	10	0.58	Employer Request, Ontario	5.75
02/10/2014		0.58	Employer Request, Ontario	
03/10/2014		0.58	Employer Request, Ontario	
03/10/2014	9	0.58	Employer Request, Ontario	5.18
03/10/2014	16	0.58	Employer Request, Ontario	9.20
03/10/2014	7	0.58	Employer Request, Ontario	4.03
03/10/2014		0.58	Employer Request, Ontario	
20/10/2014	26	0.58	Employer Request, Ontario	14.95
20/10/2014		0.58	Employer Request, Ontario	
22/10/2014	37	0.58	Employer Request, Ontario	21.28
22/10/2014		0.58	Employer Request, Ontario	
31/10/2014		0.58	Employer Request, Ontario	
31/10/2014	14	0.58	Employer Request, Ontario	8.05
31/10/2014		0.58	Employer Request, Ontario	,
06/11/2014	27	0.58	Employer Request, Ontario	15.53
06/11/2014	46	0.58	Employer Request, Ontario	26.45
06/11/2014		0.58	Employer Request, Ontario	
19/11/2014	12	0.58	Employer Request, Ontario	6.90
19/11/2014	12	0.58	Employer Request, Ontario	6.90
				352.53

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers	i			OT Mileage
October 2, 2014		Kilometers:		
Start Location:		End Location:	PIA Terminal 1	
October 2, 2014		Kilometers:	10	
Start Location:	PIA Terminal 1	End Location:	1980 Matheson Blvd E, Mississauga, Ontario	
October 2, 2014		Kilometers:	8	
Start Location:	1980 Matheson Blvd E, Mississauga, Ontario	End Location:	2720 Britannia Rd E, Mississauga, Ontario	
October 2, 2014	_	Kilometers:	10	
Start Location:	2720 Britannia Rd, E, Mississauga, Ontario	End Location:	PIA Terminal 3	
October 2, 2014		Kilometers:		

Trip Number

8550074659

Date:

17/08/2020

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Trip Number

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Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM Trip End Date: 19/11/2014 16:00 PM

Start Location: PIA Terminal 3 End Location:

Kilometers: October 3, 2014 Sheraton Gateway Hotel, Start Location: End Location: Mississauga October 3, 2014 Kilometers: Sheraton Gateway Hotel, 4567 Dixie Rd, End Location: Start Location: Mississauaga Mississauga, Ontario October 3, 2014 Kilometers: 4567 Dixie Rd. 385 Rexdale Blvd. Start Location: End Location: Toronto, Ontario Mississauga, Ontario October 3, 2014 Kilometers: 385 Rexdale Blvd, Toronto, End Location: PIA Terminal 1 Start Location: Ontario October 3, 2014 Kilometers: Start Location: PIA Terminal 1 End Location: October 20, 2014 Kilometers: 26

1980 Matheson Blvd E. End Location: 4900 Yonge St, Toronto Start Location: Mississauga, Ontario

October 20, 2014 Kilometers: 4900 Yonge St, Toronto, Start Location: End Location: Ontario

3900 Victoria Park Avenue,

55 Town Centre Court.

Start Location:

October 22, 2014 Kilometers: 37

3900 Victoria Park 1980 Matheson Blvd E, Start Location: End Location: Avenue, Toronto Mississauga, Ontario October 22, 2014 Kilometers:

Start Location: End Location: Toronto, Ontario October 31, 2014 Kilometers:

3389 Steeles Avenue W, Start Location: End Location: Toronto, Ontario

14 October 31, 2014 Kilometers:

3389 Steeles Avenue W, 55 Town Centre Court, Start Location: End Location: Toronto, Ontario Toronto, Ontario

October 31, 2014 Kilometers:

Toronto, Ontario November 6, 2014 Kilometers: 27

60 Harbour St, Toronto, 1980 Matheson Blvd, Start Location: End Location: Mississauga, Ontario

End Location:

Ontario



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Trip Number

8550074659

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM Trip End Date: 19/11/2014 16:00 PM

November 6, 2014		Kilometers:	46
Start Location:	60 Harbour St, Toronto, Ontario	End Location:	6900 Airport Rd, Mississauga, Ontario
November 6, 2014		Kilometers:	
Start Location:	6900 Airport Rd, Mississauga, Ontario	End Location:	
November 19, 2014		Kilometers:	12
Start Location:	1980 Matheson Blvd E, Mississauga, Ontario	End Location:	5353 Dundas St W, Toronto, Ontario
November 19, 2014		Kilometers:	12
Start Location:	5353 Dundas St W, Toronto, Ontario	End Location:	1980 Matheson Blvd E, Mississauga, Ontario

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/10/2014	001	Parking/ Tolls	4.50	CAON
22/10/2014	002	Parking/ Tolls	8.75	CAON
06/11/2014	003	Parking/ Tolls	6.00	CAON
19/11/2014	004	Parking/ Tolls	9.00	CAON
		Sum of Receipts	28.25	CAON

Addi	tional Receipt Informatio	on		
No.	Receipt	Туре	Content	
001	Parking/ Tolls	Description	Parking	
002	Parking/ Tolls	Description	Parking	

Date:

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Page:

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Travel Expense Statement

Trip Number

8550075112

Personnel Number:

Trip Number

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/12/2014 12:00 PM
Trip End Date: 04/12/2014 18:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 2. Key stakeholders TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Within GTA Region

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement	
Expenses	Amount (CAD)
Travel Flat Rates	41.98
Sum of Receipts to be Reimbursed	14.00
Reimbursement Amount	55.98

Cost Assignment

55.98 CAD of 55.98 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 80110 MANAGEMENT OVER CLOSED

Date	No.	Expense Type	Amount Tax Ju (CAD) Code	
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilomete	r Allov	wance			
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount	(CAD)
04/12/2014			Employer Request, Ontario		

Travel Expense Statement

Trip Number

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/12/2014 12:00 PM Trip End Date: 04/12/2014 18:00 PM

Date	km Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/12/2014		Employer Request, Ontario	
			41.98

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers			OT Mileage
December 4, 2014		Kilometers:	28
Start Location:	1980 Matheson Blvd E, Mississuaga	End Location:	250 Dundas St West, Toronto
December 4, 2014		Kilometers:	
Start Location:	250 Dundas St West, Toronto	End Location:	

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/12/2014	001	Parking/ Tolls	14.00	CAON
		Sum of Receipts	14.00	CAON

Add	tional Receipt Information		
No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking

Comments

Annual Meeting with ACLC

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Trip Number

Travel Expense Statement

Trip Number

8550078040

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 21/01/2015 06:00 AM Trip End Date: 04/03/2015 16:30 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 1. Operational Activities

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: Within GTA Region

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** 49.05 Per Diems for Meals Travel Flat Rates 134.32 Sum of Receipts to be Reimbursed 32.65 Reimbursement Amount 216.02

Cost Assignment

216.02 CAD of 216.02 CAD assigned to:

Company Code: 0850 CBSA / ASFC 397100000 Cost Center: RDG, GTA

Order:

Fund: Operating-Non-Salary 2001

Functional Area: 80110 MANAGEMENT OVER CLOSED

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
21/01/2015	004	Lunch	16.35	CAON
23/01/2015	005	Lunch	16.35	CAON
04/03/2015	006	Lunch	16.35	CAON
		Sum Meals & Incid. man. keyed	49.05	

Trip Number

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8550078040

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 21/01/2015 06:00 AM
Trip End Date: 04/03/2015 16:30 PM

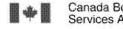
Total Meals and Incidentals 49.05

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
21/01/2015		0.56	Employer Request, Ontario	
21/01/2015		0.56	Employer Request, Ontario	
23/01/2015		0.56	Employer Request, Ontario	
23/01/2015		0.56	Employer Request, Ontario	
04/03/2015		0.56	Employer Request, Ontario	
04/03/2015		0.56	Employer Request, Ontario	
				134.32

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers			OT Mileage
January 21, 2015		Kilometers:	
Start Location:		End Location:	75 Lower Simcoe St, Toronto, Ontario
January 21, 2015		Kilometers:	
Start Location:	75 Lower Simcoe St, Toronto, Ontario	End Location:	
January 23, 2015		Kilometers:	
Start Location:		End Location:	2 Eirann Quay, Torotno, Ontario
January 23, 2015		Kilometers:	
Start Location:	2 Eirann Quay, Toronto, Ontario	End Location:	
March 4, 2015		Kilometers:	31
Start Location:		End Location:	3389 Steeles Ave East, Toronto, Ontario
March 4, 2015		Kilometers:	
Start Location:	3389 Steeles Ave East, Toronto, Ontario	End Location:	

Receip	ts				
Data	Na	Evnanca Typa		Amount	Tax Jur.
Date	No.	Expense Type		(CAD)	Code



Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 21/01/2015 06:00 AM Trip End Date: 04/03/2015 16:30 PM

23/01/2015	001	Parking/ Tolls	16.00	CAON
15/02/2015	002	Misc. Business Services	7.90	CAON
04/03/2015	003	Parking/ Tolls	8.75	CAON
		Sum of Receipts	32.65	CAON

Addi	tional Receipt Information		
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking
002	Misc. Business Services	Description	Passport Photo Receipt for Security Clearance
		Additional Text for Receipt	Need to update TS security clearance, new passport sized photos required
003	Parking/ Tolls	Description	Parking
004	Lunch	Description	Lunch Expense
005	Lunch	Description	Lunch Expense
006	Lunch	Description	Lunch Expense

Trip Number

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Trip Number

Travel Expense Statement

Personnel Number: Traveller's Name: Goran VRAGOVIC

Trip Start Date: 27/05/2015 05:00 AM Trip End Date: 27/05/2015 19:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

AAC585577 Category: TAN: 2. Key stakeholders

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement			
Expenses	Amount (CAD)		
Travel Flat Rates	55.64		
Sum of Receipts to be Reimbursed	76.50		
Sum of Receipts Paid by Company	392.39		
Total Cost of Trip	524.53		
Less: Sum of Receipts Paid by Company	(392.39)		
Reimbursement Amount	132.14		

Cost Assignment

524.53 CAD of 524.53 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Agence des services frontaliers du Canada



Date: 17/08/2020

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Travel Expense Statement

Trip Number

8550078877

Personnel Number:

Goran VRAGOVIC Traveller's Name:

Trip Start Date: 27/05/2015 05:00 AM Trip End Date: 27/05/2015 19:30 PM

Kilometer Allowance				
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
27/05/2015			Employer Request, Ontario	
27/05/2015			Employer Request, Ontario	
				55.64

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	S		OT Mileage
May 27, 2015		Kilometers:	
Start Location:		End Location:	Pearson Airport Terminal 1
May 27, 2015		Kilometers:	
Start Location:	Pearson Airport Terminal 1	End Location:	

Receipts	Receipts			
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/05/2015	002	Taxi	46.50	CAON
27/05/2015	003	Parking/ Tolls	30.00	CAON
		Sum of Receipts	76.50	CAON
27/05/2015	001	Airfare paid by CBSA	392.39	CAON
		Total Paid by Company	392.39	CAON

Addi	Additional Receipt Information				
No.	Receipt	Туре	Content		
001	Airfare paid by CBSA	Provider Category	Airline		
		Provider Code	Air Canada		
002	Taxi	Location	Ottawa		
		Additional Text for Receipt	Taxi from 111 Sussex Dr to Ottawa Airport		

Comments

17/08/2020 Date:

Trip Number

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8550079432

Travel Expense Statement

Personnel Number:

8550079432

Trip Number

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/06/2015 10:00 AM Trip End Date: 04/06/2015 17:30 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

TAN: Category: 1. Operational Activities

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Within GTA Region

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** 96.30 **Travel Flat Rates** Sum of Receipts to be Reimbursed 16.00 Reimbursement Amount 112.30

Cost Assignment

112.30 CAD of 112.30 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 80110 MANAGEMENT OVER CLOSED

Date	No.	Expense Type	Amount Tax Ju (CAD) Code	
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilomete	r Allov	wance			
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount	(CAD)
04/06/2015			Employer Request, Ontario		

Date:

17/08/2020

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Page:

Trip Number

8550079432

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/06/2015 10:00 AM
Trip End Date: 04/06/2015 17:30 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/06/2015			Employer Request, Ontario	
				96.30

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	s		OT Mileage
June 4, 2015		Kilometers:	54
Start Location:	1980 Matheson Blvd East, Mississuaga	End Location:	55 Bay St North, Hamilton
June 4, 2015		Kilometers:	
Start Location:	55 Bay St North, Hamilton	End Location:	

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	001	Parking/ Tolls	16.00	CAON
		Sum of Receipts	16.00	CAON

Addi	tional Receipt Information	on	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking
		Additional Text for Receipt	Hamilton - RSMT and Staff Town Hall

Trip Number

1 / 3

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 18/06/2015 06:00 AM Trip End Date: 18/06/2015 18:00 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

AAC550585 TAN: Category: 2. Key stakeholders

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement			
Expenses	Amount (CAD)		
Per Diems for Meals	16.60		
Travel Flat Rates	55.64		
Sum of Receipts to be Reimbursed	70.00		
Sum of Receipts Paid by Company	382.22		
Total Cost of Trip	524.46		
Less: Sum of Receipts Paid by Company	(382.22)		
Reimbursement Amount	142.24		

Cost Assignment

524.46 CAD of 524.46 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

MANAGEMENT & OVERSIGHT PR Functional Area: 80101

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/06/2015	003	Lunch	16.60	CAON
		Sum Meals & Incid. man. keyed	16.60	

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 18/06/2015 06:00 AM Trip End Date: 18/06/2015 18:00 PM

> Total Meals and Incidentals 16.60

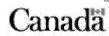
	_				
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount	(CAD)
18/06/2015			Employer Request, Ontario		
18/06/2015			Employer Request, Ontario		

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	s		OT Mileage
June 18, 2015		Kilometers:	
Start Location:		End Location:	Toronto Pearson Terminal 1
June 18, 2015		Kilometers:	
Start Location:	Toronto Pearson Terminal	End Location:	

Receip	its					
Date	No.	Expense Type			Amount (CAD)	Tax Jur. Code
18/06/20	015 002	Taxi			40.00	CAON
18/06/20	004	Parking/ Tolls			30.00	CAON
		Sum of Receipts			70.00	CAON
18/06/2015 001 Airfare paid by CBSA		Airfare paid by CBSA			343.80	CAON
18/06/20	15 005	HRG/STS Fees			38.42	CAON
		Total Paid by Company			382.22	CAON
No. F	Receipt		Туре	Content		
001 A	Airfare pai	d by CBSA	Provider Category	Airline		
			Provider Code	Air Canada		
002 Т	Гахі		Location	Ottawa		

Agence des services frontaliers du Canada



Date: 17/08/2020

Trip Number

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8550079454

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 18/06/2015 06:00 AM
Trip End Date: 18/06/2015 18:00 PM

Add	itional Receipt Informatio	n	
005	HRG/STS Fees	Description	HRG STS Fee
		Additional Text for Receipt	HRG / STS Fee while using the online portal.

Comments

International to Domestic Meeting on June 18, 2015 (Ottawa)

Trip Number

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8550089901

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 17/06/2016 09:00 AM Trip End Date: 23/06/2016 16:00 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Orillia, Scarborough

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Per Diems for Meals 34.00 Travel Flat Rates 196.10 Sum of Receipts to be Reimbursed 16.00 Reimbursement Amount 246.10

Cost Assignment

246.10 CAD of 246.10 CAD assigned to:

Company Code: 0850 CBSA / ASFC 397100000 Cost Center: RDG, GTA

Order:

Fund: Operating-Non-Salary 2001

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
17/06/2016	002	Lunch	17.00	CAON
23/06/2016	003	Lunch	17.00	CAON
		Sum Meals & Incid. man. keyed	34.00	
		Total Meals and Incidentals	34.00	

Trip Number

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Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 17/06/2016 09:00 AM Trip End Date: 23/06/2016 16:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
17/06/2016			Employer Request, Ontario	
17/06/2016			Employer Request, Ontario	
23/06/2016			Employer Request, Ontario	
23/06/2016			Employer Request, Ontario	

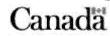
^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	S			OT Mileage
June 17, 2016		Kilometers:		
Start Location:		End Location:	5899 Rama Rd, Rama	
June 17, 2016		Kilometers:		
Start Location:	5899 Rama Rd, Rama	End Location:		
June 23, 2016		Kilometers:		
Start Location:		End Location:	55 Town Centre Court, Scarborough	
June 23, 2016		Kilometers:		
Start Location:	55 Town Centre Court, Scarborough	End Location:		

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
7/06/2016	001	Parking/ Tolls	16.00	CAON
		Sum of Receipts	16.00	CAON

Addi	tional Receipt Informatio	on		
No.	Receipt	Туре	Content	
001	Parking/ Tolls	Description	Parking	

Agence des services frontaliers du Canada



Date: 17/08/2020

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Trip Number 8550089901

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 17/06/2016 09:00 AM
Trip End Date: 23/06/2016 16:00 PM

Comments

Travel within Region for stakeholder and employee meetings

1 / 3

Travel Expense Statement

Trip Number

8550100476

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 05/10/2017 05:00 AM
Trip End Date: 05/10/2017 17:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN: AAC525821

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address RATOC Number:

Travel Plan Reference Number:
Objective: Operations

Summary of Settlement		
Expenses	Amount (CAD)	
Travel Flat Rates	57.72	
Sum of Receipts to be Reimbursed	110.00	
Sum of Receipts Paid by Company	665.97	
Total Cost of Trip	833.69	
Less: Sum of Receipts Paid by Company	(665.97)	
Reimbursement Amount	167.72	

Cost Assignment

833.69 CAD of 833.69 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order: Fund:

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

8550100476

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 05/10/2017 05:00 AM Trip End Date: 05/10/2017 17:00 PM

Kilometer Allowance				
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
05/10/2017			Employer Request, Ontario	
05/10/2017			Employer Request, Ontario	
				57.72

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometers	;		OT Milea	ige
October 5, 2017		Kilometers:		
Start Location:		End Location:	Pearson Airport Terminal 1 Parking	
October 5, 2017		Kilometers:		
Start Location:	Pearson Airport Terminal 1	End Location:		

Rece	eipts						
Date		No.	Expense Type			Amount (CAD)	Tax Jur. Code
05/10/	2017	003	Taxi			40.00	CAON
05/10/	2017	004	Taxi			40.00	CAON
05/10/	05/10/2017 005 Parking/ Tolls		Parking/ Tolls			30.00	CAON
			Sum of Receipts			110.00	CAON
05/10/	2017	001	Airfare paid by CBSA			641.11	CAON
05/10/	2017	002	HRG/STS Fees			24.86	CAON
			Total Paid by Company	1		665.97	CAON
No.	Rec	ceipt		Туре	Content		
001	Airfa	re pai	d by CBSA	Description	Airfare - Toronto to Ottawa Return		Return
				Provider Category	Airline		
				Provider Code	Air Canada		
002	HRG	S/STS	Fees	Description	HRG/STS F	ees	

8550100476

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 05/10/2017 05:00 AM Trip End Date: 05/10/2017 17:00 PM

003	Taxi	Description	Taxi
		Location	Ottawa
		Additional Text for Receipt	Taxi from Ottawa Airport to 191 Laurier Ave
004	Taxi	Description	Taxi
		Location	Ottawa
		Additional Text for Receipt	Taxi from 191 Laurier to Ottawa Airport
005	Parking/ Tolls	Description	Terminal 1 Parking

Comments

Depart from home Thursday, October 5, 2017. Travel to the airport for flight to Ottawa. Return Thursday, October 5, 2017. Purpose FIMC. (Same day travel).

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8550078931

8550078931

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 20/05/2015 07:00 AM Trip End Date: 20/05/2015 19:30 PM

General Trip Information

Country/Region: STA Applied: Yes CA-Ontario

AAC520572 Category: TAN: 3. Internal governance

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement			
Expenses	Amount (CAD)		
Per Diems for Meals	16.60		
Travel Flat Rates	55.64		
Sum of Receipts to be Reimbursed	71.50		
Sum of Receipts Paid by Company	468.22		
Total Cost of Trip	611.96		
Less: Sum of Receipts Paid by Company	(468.22)		
Reimbursement Amount	143.74		

Cost Assignment

611.96 CAD of 611.96 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397100000 RDG, GTA

Order:

Fund: 2001 Operating-Non-Salary

MANAGEMENT & OVERSIGHT PR Functional Area: 80101

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/05/2015	004	Lunch	16.60	CAON
		Sum Meals & Incid. man. keyed	16.60	

Travel Expense Statement

Trip Number

8550078931

Personnel Number:

Goran VRAGOVIC Traveller's Name:

Trip Start Date: 20/05/2015 07:00 AM Trip End Date: 20/05/2015 19:30 PM

> Total Meals and Incidentals 16.60

Kilometer Allowance				
Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
20/05/2015			Employer Request, Ontario	
20/05/2015			Employer Request, Ontario	
				55.64

^{*} flat rates are rounded-up 2 decimal places

Daily Kilometer	s		OT Mileage
May 20, 2015		Kilometers:	
Start Location:		End Location:	Pearson Airport Terminal 1
May 20, 2015		Kilometers:	
Start Location:	Pearson Airport Terminal 1	End Location:	

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/05/2015	002	Taxi	41.50	CAON
20/05/2015	003	Parking/ Tolls	30.00	CAON
		Sum of Receipts	71.50	CAON
20/05/2015	001	Airfare paid by CBSA	468.22	CAON
		Total Paid by Company	468.22	CAON

Na	Receipt	Туре	Content
IVO.	Receipt	туре	Content
001	Airfare paid by CBSA	Provider Category	Airline
		Provider Code	Air Canada
002	Taxi	Location	Ottawa
		Additional Text for Receipt	Taxi from 191 Laurier to Ottawa Airport

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Trip Number 8550078931

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 20/05/2015 07:00 AM
Trip End Date: 20/05/2015 19:30 PM

Comments

Meeting with Vice-President, Operations Branch and Headquarters Executives

Trip Number

Travel Expense Statement

Trip Number

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 25/11/2013 07:00 AM
Trip End Date: 25/11/2013 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: Toronto

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: OFC AN APEX MEETINGS

Summary of SettlementExpensesAmount (CAD)Sum of Receipts to be Reimbursed10.00Reimbursement Amount10.00

Cost Assignment

10.00 CAD of 10.00 CAD assigned to:

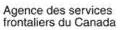
Company Code: 0850 CBSA / ASFC Cost Center: 397180000 Director CPS

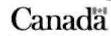
Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00





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Trip Number

8550067807

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 25/11/2013 07:00 AM
Trip End Date: 25/11/2013 19:00 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur Code
25/11/2013	001	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON

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Trip Number

Travel Expense Statement

Trip Number

8550088224

Personnel Number:

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 04/06/2015 06:30 AM Trip End Date: 04/06/2015 07:30 AM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street, Hamilton, Ontario

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 10.00 Reimbursement Amount 10.00

Cost Assignment

10.00 CAD of 10.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397180000 **Director CPS**

Order:

Fund: 2001 Operating-Non-Salary

Functional Area: 80101 MANAGEMENT & OVERSIGHT PR

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date:

14/08/2020

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Trip Number

8550088224

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 04/06/2015 06:30 AM
Trip End Date: 04/06/2015 07:30 AM

Date	No.	Expense Type	Amount (CAD)	Tax Jur Code
)4/06/2015	001	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON

Addi	Additional Receipt Information					
No.	Receipt	Туре	Content			
001	Parking/ Tolls	Description	Parking			

Comments

RSMT meeting plus Town Hall session with TOD staff in Hamilton, Ontario. Used fleet vehicle. Incurred \$10.00 parking charge.

Date:

14/08/2020

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Travel Expense Statement

Trip Number

8550107331

Personnel Number:

8550107331

Trip Number

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 11/06/2018 11:30 AM Trip End Date: 11/06/2018 16:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

Category: 1. Operational Activities TAN:

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 55 Bay Street North, Hamilton

Departure Address 1980 Matheson Blvd. East, Mississauga, On

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Expenses Amount (CAD) 19.20 Per Diems for Meals 7.00 Sum of Receipts to be Reimbursed Reimbursement Amount 26.20

Cost Assignment

26.20 CAD of 26.20 CAD assigned to:

CBSA / ASFC Company Code: 0850 Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
11/06/2018	001	Lunch	19.20	CAON
		Sum Meals & Incid. man. keyed	19.20	
		Total Meals and Incidentals	19.20	

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Trip Number 8550107331

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 11/06/2018 11:30 AM
Trip End Date: 11/06/2018 16:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
11/06/2018	002	Parking/ Tolls	7.00	CAON
		Sum of Receipts	7.00	CAON

Addi	tional Receipt Information		
No.	Receipt	Туре	Content
002	Parking/ Tolls	Additional Text for Receipt	Meter Parking and, therefore, no receipt.

Comments

Town Hall and National Public Service Week activities. Town Hall in Hamilton Trade Office on 11JUN2018 Used fleet car to reduce costs.

8550108849

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Travel Expense Statement

Personnel Number:

8550108849

Trip Number

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 15/08/2018 13:20 PM Trip End Date: 15/08/2018 20:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Towne Centre, Scarborough

Departure Address 1980 Matheson Blvd, Mississauga, Ontario

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 7.50 Reimbursement Amount 7.50

Cost Assignment

7.50 CAD of 7.50 CAD assigned to:

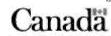
Company Code: 0850 CBSA / ASFC Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

ada Border Agence des services rices Agency frontaliers du Canada



Date: 14/08/2020

Trip Number

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8550108849

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 15/08/2018 13:20 PM
Trip End Date: 15/08/2018 20:00 PM

Receipts	Receipts			
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
15/08/2018	001	Parking/ Tolls	6.00	CAON
15/08/2018	002	Parking/ Tolls	1.50	CAON
		Sum of Receipts	7.50	CAON

Addi	Additional Receipt Information					
No.	Receipt	Type	Content			
001	Parking/ Tolls	Description	Parking			
002	Parking/ Tolls	Description	Additional parking costs			

Comments

Disciplinary Meeting held in Scarborough TOD office

8550111579

Trip Number

Travel Expense Statement

Trip Number

8550111579

Personnel Number:

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 13/11/2018 08:50 AM Trip End Date: 13/11/2018 14:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street North, Hamilton, ON L8R 3P7

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** 19.85 Per Diems for Meals Reimbursement Amount 19.85

Cost Assignment

19.85 CAD of 19.85 CAD assigned to:

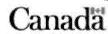
Company Code: 0850 CBSA / ASFC Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
13/11/2018	001	Lunch	19.85	CAON
		Sum Meals & Incid. man. keyed	19.85	
		Total Meals and Incidentals	19.85	

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Date: 14/08/2020

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Trip Number

8550111579

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 13/11/2018 08:50 AM
Trip End Date: 13/11/2018 14:00 PM

Addi	tional Receipt Information			
No.	Receipt	Туре	Content	
001	Lunch	Description	Lunch	

Comments

Travel for the Diversity and Inclusion Town Hall as well as management meeting on the future of COD-TOD pilot on Tuesday, November 13, 2018.

Canada

19/08/2020 Date:

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Travel Expense Statement

Trip Number

8550112105

Personnel Number:

Trip Number

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 06/12/2018 08:00 AM Trip End Date: 06/12/2018 16:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

Category: 1. Operational Activities TAN:

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 55 Bay Street North, Hamilton, ON L8R 3P7 Departure Address 1980 Matheson Blvd East, Mississauga, On

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 11.00 Reimbursement Amount 11.00

Cost Assignment

11.00 CAD of 11.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

Date:

19/08/2020

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Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 06/12/2018 08:00 AM
Trip End Date: 06/12/2018 16:00 PM

tement	Trip Number	8550112105

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/12/2018	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Addi	tional Receipt Informatio	n	
No.	Receipt	Туре	Content
001	Parking/ Tolls	Description	Parking

Comments

Hamilton Town Hall with all staff Fleet Car used to reduce travel costs

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Trip Number

8550112356

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 10/12/2018 05:15 AM
Trip End Date: 10/12/2018 23:15 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 451 Talbot Street, London, Ontario
Departure Address 1980 Matheson Blvd East, Mississauga

RATOC Number:

Travel Plan Reference Number:
Objective: Operations

Summary of SettlementExpensesAmount (CAD)Per Diems for Meals90.10Sum of Receipts to be Reimbursed15.00Reimbursement Amount105.10

Cost Assignment

105.10 CAD of 105.10 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
10/12/2018	001	Breakfast	20.25	CAON
10/12/2018	002	Lunch	19.85	CAON
10/12/2018	003	Dinner	50.00	CAON
		Sum Meals & Incid. man. keyed	90.10	
		Total Meals and Incidentals	90.10	

Date:

14/08/2020

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Page:

Trip Number

8550112356

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 10/12/2018 05:15 AM
Trip End Date: 10/12/2018 23:15 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
10/12/2018	004	Parking/ Tolls	15.00	CAON
		Sum of Receipts	15.00	CAON

Add	itional Receipt Informatio	on	
No.	Receipt	Туре	Content
001	Breakfast	Description	Breakfast
002	Lunch	Description	Lunch
003	Dinner	Description	Dinner
004	Parking/ Tolls	Description	Parking

Comments

London Town Hall

8550116778

Trip Number

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8550116778

Trip Number

Travel Expense Statement

Personnel Number:

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 20/03/2019 08:45 AM Trip End Date: 20/03/2019 17:30 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

TAN: Category: 1. Operational Activities

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 55 Bay Street, Hamilton

Departure Address 1980 Matheson Blvd East, Mississauga

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Sum of Receipts to be Reimbursed 12.00 Reimbursement Amount 12.00

Cost Assignment

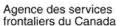
12.00 CAD of 12.00 CAD assigned to:

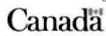
Company Code: 0850 CBSA / ASFC Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00





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Trip Number

8550116778

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 20/03/2019 08:45 AM
Trip End Date: 20/03/2019 17:30 PM

Date	No.	Expense Type	Amount (CAD)	Tax Jur Code
20/03/2019	001	Parking/ Tolls	12.00	CAON
		Sum of Receipts	12.00	CAON

Comments

Inside-Out Panel Workshop hosted by GTAR Wellness Committee in the morning; GTAR Wellness Committee meeting in the afternoon. EIOD fleet car was used to reduce costs.

Canada

Date: 14/08/2020

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Travel Expense Statement

Trip Number

8550120536

Personnel Number:

8550120536

Trip Number

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 17/06/2019 00:00 AM Trip End Date: 17/06/2019 00:01 AM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. N., Hamilton

Departure Address 1980 Matheson Blvd. E., Mississauga

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** 0.00 Reimbursement Amount

Cost Assignment

of assigned to:

Company Code:

Cost Center:

Order:

Fund:

Functional Area:

Date	No.	Expense Type	Amount Tax Jur. (CAD) Code
		Sum Meals & Incid. man. keyed	0.00
		Total Meals and Incidentals	0.00

8550120536

Trip Number

Date: 14/08/2020

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Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 17/06/2019 00:00 AM
Trip End Date: 17/06/2019 00:01 AM

Comments

Travel for the Hamilton TOD Town Hall taking place on Monday, June 17, 2019.

Trip CANCELLED.

Trip Number

8550120536

Travel Expense Statement

8550121812 Trip Number

Personnel Number:

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 28/08/2019 05:30 AM Trip End Date: 28/08/2019 20:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

TAN: Category: 1. Operational Activities

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 451 Talbot St., London, ON

Departure Address 1980 Matheson Blvd. E., Mississauga

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Expenses Amount (CAD) 71.15 Per Diems for Meals Sum of Receipts to be Reimbursed 15.00 Reimbursement Amount 86.15

Cost Assignment

86.15 CAD of 86.15 CAD assigned to:

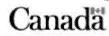
CBSA / ASFC Company Code: 0850 Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
28/08/2019	002	Breakfast	20.50	CAON
28/08/2019	003	Dinner	50.65	CAON
		Sum Meals & Incid. man. keyed	71.15	
		Total Meals and Incidentals	71.15	

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Date: 14/08/2020

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Trip Number

8550121812

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 28/08/2019 05:30 AM
Trip End Date: 28/08/2019 20:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
28/08/2019	001	Parking/ Tolls	15.00	CAON
		Sum of Receipts	15.00	CAON

Comments

Travel for an employee engagement session with London TOD staff on Wednesday, August 28, 2019.

Travel Expense Statement

Trip Number

8550122253

Personnel Number:

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 22/08/2019 06:30 AM Trip End Date: 22/08/2019 18:30 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

Category: 1. Operational Activities TAN:

Trip Type Statutory: CDF: 000 1- Regular Travel

Destination: 55 Bay St. N., Hamilton, ON

Departure Address 1980 Matheson Blvd. E., Mississauga, ON

RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Expenses Amount (CAD) Per Diems for Meals 20.10 Sum of Receipts to be Reimbursed 11.00 Reimbursement Amount 31.10

Cost Assignment

31.10 CAD of 31.10 CAD assigned to:

CBSA / ASFC Company Code: 0850 Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
22/08/2019	002	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	

8550122253

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 22/08/2019 06:30 AM Trip End Date: 22/08/2019 18:30 PM

Date	No.	Expense Type	Amount	Tax Jur.
Date	INO.	Expense Type	(CAD)	Code
22/08/2019	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Comments

Travel to Hamilton TOD Office on Thursday, August 22, 2019.

Date:

14/08/2020

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Travel Expense Statement

Trip Number

8550122608

Personnel Number:

8550122608

Trip Number

Traveller's Name: JEANIE CHOW

Trip Start Date: 05/09/2019 07:00 AM
Trip End Date: 05/09/2019 18:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Hamilton International Airport

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of SettlementExpensesAmount (CAD)Per Diems for Meals20.10Reimbursement Amount20.10

Cost Assignment

20.10 CAD of 20.10 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
05/09/2019	001	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	

Trip Number

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8550122608

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 05/09/2019 07:00 AM
Trip End Date: 05/09/2019 18:00 PM

Comments

RSMT Meeting and EE Engagement Session at John C. Munroe International Airport in Hamilton, Ontario

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Trip Number

8550122609

Travel Expense Statement

Personnel Number:

8550122609

Trip Number

Traveller's Name: JEANIE CHOW

Trip Start Date: 06/09/2019 07:00 AM
Trip End Date: 06/09/2019 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. N., Hamilton, ON

Departure Address RATOC Number:

Travel Plan Reference Number:

Objective: Human Resources

Summary of SettlementExpensesAmount (CAD)Per Diems for Meals20.10Sum of Receipts to be Reimbursed11.00Reimbursement Amount31.10

Cost Assignment

31.10 CAD of 31.10 CAD assigned to:

Company Code: 0850 CBSA / ASFC
Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/09/2019	002	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	

8550122609

Travel Expense Statement

Personnel Number:

JEANIE CHOW Traveller's Name:

Trip Start Date: 06/09/2019 07:00 AM Trip End Date: 06/09/2019 19:00 PM

Receipts				
Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/09/2019	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Comments

Meeting with EE and CIU (re: Labour Relations case)

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8550123451

Travel Expense Statement

Personnel Number:

8550123451

Trip Number

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 24/09/2019 05:30 AM Trip End Date: 24/09/2019 17:00 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. N., Hamilton, ON

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Per Diems for Meals 20.10 Reimbursement Amount 20.10

Cost Assignment

20.10 CAD of 20.10 CAD assigned to:

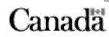
Company Code: 0850 CBSA / ASFC Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
24/09/2019	001	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	

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Date: 14/08/2020

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Trip Number

8550123451

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 24/09/2019 05:30 AM
Trip End Date: 24/09/2019 17:00 PM

Comments

ATIP Presentation 8:00-9:30 a.m. Hamilton Town Hall 9:00-12:00 am. Employmenet Engagement 1:00-4:00 pm 8550123452

Trip Number

Travel Expense Statement

Trip Number

8550123452

Personnel Number:

Traveller's Name: **JEANIE CHOW**

Trip Start Date: 26/09/2019 06:30 AM Trip End Date: 26/09/2019 19:30 PM

General Trip Information

Country/Region: STA Applied: No CA-Ontario

1. Operational Activities TAN: Category:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 451 Talbot St., London, ON

Departure Address RATOC Number:

Travel Plan Reference Number: Objective: Operations

Summary of Settlement Amount (CAD) **Expenses** Per Diems for Meals 40.60 Reimbursement Amount 40.60

Cost Assignment

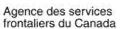
40.60 CAD of 40.60 CAD assigned to:

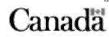
Company Code: 0850 CBSA / ASFC Cost Center: 397160000 Dir. Trade Ops

Order: Fund:

Functional Area: 10500 Comm.-Trade Facil. & Comp

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
26/09/2019	001	Lunch	20.10	CAON
26/09/2019	002	Breakfast	20.50	CAON
		Sum Meals & Incid. man. keyed	40.60	
		Total Meals and Incidentals	40.60	





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Trip Number 8550123452

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 26/09/2019 06:30 AM
Trip End Date: 26/09/2019 19:30 PM

Comments

London Town Hall and EE Engagement